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**EYD Plan Focus Group: Early Childhood (0-8)**

**Tuesday, June 15, 2010**

**Benning Library**

**Objectives:**

- *The focus group will be able to articulate what “success” for early childhood looks like in the District*
- *The focus group will recommend which aspects of early childhood should be prioritized*
- *The focus group will articulate how our office and District agencies can better collaborate across government and between sectors around early childhood issues.*

**Agenda:**

- I. Opening/Welcome
- II. Overview of Education and Youth Development (EYD) Plan
  - a. (Appendix 1 and attached documents: Six Citywide Goals, How Agency Indicators Align With the Six Citywide Goals)
  - b. Early Childhood conversation focusing particularly on Goals 1, 3, 5
- III. Digging Deeper – What is important to stakeholders?
  - a. Defining “successful outcomes” for early childhood (Appendix 2)
    - i. Healthcare needs (pre/peri-natal, immunization, social/emotional development)
      1. Quality of services
      2. Accessibility of services
      3. Coordination across government/sectors
    - ii. Education (standards, quality, both pre-K and OST)
      1. Quality of services
      2. Accessibility of services
      3. Coordination across government/sectors
    - iii. Families/support (poverty, teen pregnancy, adult/parent education, nutrition)
      1. What services should be offered?
      2. Quality of services
      3. Coordination across government/sectors
- IV. How can our office help us move from where we are to where we want to be? How do you want to see/learn about the progress made within these issues?
- V. Closing/Thank you
  - a. Contact information: questions? Ahnna Smith ([Ahnna.smith@dc.gov](mailto:Ahnna.smith@dc.gov) ; 202-727-0696)

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Office of the Deputy Mayor for Education

NOTES FROM FOCUS GROUP (6/18/10)

# Early Childhood and Pre-K Education

## Discussion: Digging Deeper (NOTES)

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### 1) Tracking Outcomes

- a) Generally, there should be a greater focus on BIRTH – 3 years old...we focus a lot on early childhood Pre-K education, but if children aren't healthy and being set up to be successful in school from day one then it is harder to catch them up when they're 4-5 and starting more formal education

### 2) Healthcare

- a) What are barriers from screening all children?
  - i) Medicaid reimbursement (complicated, time-consuming, and reimbursement below actual costs to conduct screenings)
  - ii) Not enough providers working around mental healthcare issues specifically
  - iii) "Screening" versus "surveillance" – often initial surveillance/observations are pretty effective, but not the same as full screening. Would be interesting to look at how frequently both are done and how to make both more effective/accessible.
  - iv) Parents not well-enough informed of symptoms/early warning indicators and/or how to get the services their children need
  - v) Department of Health Care Finance
    - (1) They are consolidating their trainings around well-child visits
- b) Project LAUNCH
  - i) Being undertaken by Dept of Health – will be a comprehensive survey/study around 0-8 needs and service delivery in the District
    - (1) Does not cover oral health or immunization specifically, so something to consider within EYD Plan more broadly about how we address these two areas
- c) Dept of Mental Health
  - i) Project Healthy Start: "Chat and Chew"
    - (1) Initiative to get parents in and talking about children's health needs
    - (2) Provide incentives/support such as bus tokens, food, childcare, etc
- d) Additional Questions/Comments:
  - i) Children who are eligible for Part C must have 50% delay (federal level) – however, some jurisdictions add more local dollars to fund this and can move this developmental delay percentage lower to ensure more children qualify to receive services
  - ii)

### 3) Preschool and Pre-K Education

- a) Additional indicators needed: can we look at alternative ways to measure education? "Education" before Pre-K?

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- b) One challenge identified was the reimbursement rates for childcare – potential barrier to high-quality teaching...educators for 0-5 not paid/trained as adequately as possible in some cases.
  - i) Also, childcare subsidy reimbursement process generally is very convoluted and challenging
- c) Early Stages Center
  - i) Representative spoke about program (3-5years old focus) – they are visiting more daycare centers and meeting with more pediatricians to support them around early childhood issues/screenings (goal of having potential issues addressed as early as possible so challenges can be dealt with and ensure children are ready for school)
- 4) Interagency Collaboration
  - a) General concerns were raised across group about the silos and fragmented funding – particularly in early childhood healthcare
    - i) This causes challenges around accountability and coordination
    - ii) We didn't get to discuss potential solutions/addressing these challenges
  - b) Ways in which collaboration is occurring
    - i) Project LAUNCH (contact: Twana Dinnall, DOH)
    - ii) Mental Health Roundtable (DMH, DOH, CFSA, service providers all at table)
- 5) Parent Involvement
  - a) Suggestions made around increasing/supporting parent involvement and access to information and resources:
    - i) Coordinated efforts across agencies that guide parents to resources (phone numbers, contacts, broken down by ward)
    - ii) Years ago UDC put together a resource book (they had a grant perhaps?) – last one in 2008
    - iii) BUT – with the expansion of 311, is this kind of product worthwhile. Can we look more at how we're leveraging *informal resources/supports* (i.e. churches, supermarkets, drugstores)
    - iv) Parents and parent organizations already meet and discuss many of these issues – can we work better to *go to them with resources* as opposed to making them come to the resources?
  - b) Agencies/District can potentially do more to really get families to the table (incentives, meals at meetings, childcare)
    - i) Acknowledged costs for these things and limited budgets in agencies/District generally
    - ii) Provided some examples of how we're trying to work to go to the parents to meet them where they already are to get their input/involvement

# Appendix 1

## (About the Office of the Deputy Mayor for Education and EYD Plan)

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### Office of the Deputy Mayor for Education

- The Mayor created the Department of Education to elevate the emphasis on public education to its highest level.
- The DME addresses a long-standing need in the District – the lack of central, coordinated, and aligned service delivery across all education levels, from birth into adulthood, pre-K through post-graduate work.

### The Education and Youth Development Plan

- Build upon the work of the Statewide Commission on Children, Youth, and Families (SCCYF) to ensure alignment of strategic action plans and initiatives from across the District
  - assess their implementation/progress
  - identify overlaps and gaps
- Gather feedback and input from a wide array of stakeholders regarding aspirations and needs
- Make recommendations for the future of education and positive youth development in the District of Columbia
- To be used as a guiding document for the Office of the Deputy Mayor for Education
- Mandated by Council in the FY2010 Budget Support Act of August 2009

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# Appendix 2

## (Answers from group around “What does “success” in early childhood look like to you?)

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- Well-coordinated system of care where children are screened early and frequently and are referred to the appropriate services
- A single-point entry system of care as much as possible
- Data-system where children/families are able to be tracked throughout the system
- All children have access to quality early childhood education programs
- All early childhood programs will meet uniform standards in regards to quality
- All children will have families who are engaged in education as their children’s first teachers
- All children enter kindergarten ready to learn and be successful students (meeting or exceeding early learning standards)
- All children should have access to quality education
- A Parent Advocacy or Parent Leadership Council centrally located, perhaps as a part of a local university or hospital
- As a stand-alone program not a part of the school district, it would provide training for parents across the District to engage in discussions like this one
- All children have access to healthcare
- All children have access to mental health services
- All children are enrolled by age 3, and it is mandatory
- Happy and healthy children
- Students ready to learn
- Children being able to read by the first grade
- Have wrap-around health and mental health services in schools
- All children have access to the treatment services they need *where* they need them
- All children live in a stable home environment
- All families know or can easily learn how to access the services they need
- Early identification, intervention, and treatment to assist children and families who have emotional, behavioral and social issues that can be addressed earlier to ensure school readiness and the ability to attend to the learning process
- The development of a comprehensive and working system of care for children and families
- Access to regular developmental screening for all children through age 5 at any facility that serves children
- Children enter school ready to learn, to read, and with a grasp of the 6 skills of early literacy
- All children are ready for primary school (intellectually, socially, and emotionally)
- Closing achievement gaps in education and evaluating gaps throughout, especially as children leave the early childhood group
- All children enter school ready and eager to learn
- Parents of young children enter school ready and eager to learn
- Parents of young children know about and can easily access all of the supports they need

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Office of the Deputy Mayor for Education

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